STATUS OF CLAIMS

Claims 1-21 are pending.

Claims 17-21 stand withdrawn from consideration.

Claims 1-16 stand rejected.

Claims 1 and 8 are amended herein.

Claims 8 and 10 are canceled herein.

Claims 22 and 23 are added herein.

REMARKS

Pursuant to 37 CFR § 1.121, the above amendments are marked on separate sheets entitled "VERSION WITH MARKINGS TO SHOW CHANGES MADE" following these remarks.

Claims 1-16 stand rejected under 35 USC 103 (a) as being unpatentable over U.S. Patent 5,624,399 to Ackerman in view of U.S. Patent 5,100,382 to Valtchev.

Responsive thereto, claims 1 and 8 now call for the external opening adjacent the first end to generate a back-flow within the lumen which causes the fluid to enter and inflate the balloon through the second opening.

Ackerman in view of Valtchev do not teach or suggest such a structure. The examiner relies on Valtchev, in particular, for the teaching of a single lumen. Valtchev, in the embodiment shown in Fig. 5, teaches openings 18 adjacent to the first end of an elongated member 12 for dispensing diagnostic fluid into the uterine cavity, opening 26 that allows fluid communication

between fluid communication passageway 16 and balloon cavity 24, and an opening 23 that allows fluid communication between fluid communication passageway 13 and balloon cavity 24. When there is a constant flow of fluid through opening 23, the pressure inside the balloon 20 will be higher than in the uterine cavity due to the resistance created by the smaller opening 26 on the fluid flowing from the balloon cavity 24 to the passageway 16. None of the openings 18 adjacent to the first end of the elongated member 12 generates a back-flow within the fluid communication passageways, which causes the fluid to enter and inflate the balloon as presently claimed.

Valtchev, in the embodiment of Fig. 7, teaches openings 18 adjacent to the first end of an elongated member 12 for dispensing diagnostic fluid into the uterine cavity, an opening 26' that allows fluid communication between fluid communication passageway 16 and fluid communication passageway 13, and an opening 23 that allows fluid communication between fluid communication passageway 13 and balloon cavity 24. The diameter of opening 26' is much smaller than opening 23 so that it forms a restriction so that the balloon 20 will inflate as flow goes through opening 26'. None of the openings 18 adjacent to the first end of the elongated member 12 generates a back-flow within the fluid communication passageways, which causes the fluid to enter and inflate the balloon as presently claimed.

Accordingly, withdrawal of the rejection under 35 USC 103 (a) is respectfully urged.

Favorable reconsideration of this application is respectfully requested as it is believed that all outstanding issues have been addressed herein and, further, that claims 1-7, 9, 11-16, 22, and 23 are in condition for allowance, early notification of which is earnestly solicited. Should there be any questions or other matters whose resolution may be advanced by a telephone call,

the Examiner is cordially invited to contact Applicant's undersigned attorney at his number listed below.

No fee is believed to be due as a result of this communication. The Commissioner is hereby authorized to charge any other fees which may be required or credit any overpayment to Deposit Account No. Deposit Account No. 50-2061.

Respectfully submitted,

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VERSION WITH MARKINGS TO SHOW CHANGES MADE

The following marked-up claims correspond to the replacement claims of this amendment.

1.(AMENDED) A catheter useful for non-surgical entry into a uterus to dispense a diagnostic fluid therein, the catheter comprising:

a tubular body having a lumen extending from a first end thereof to a second end thereof, the lumen having an external opening adjacent the first end for dispensing a diagnostic fluid into the interior of a subject uterus; and

a balloon disposed marginally adjacent to the first end of the body for fluid sealing the interior of the subject uterus;

the lumen having a second opening in fluid communication with the interior of the balloon for inflation thereof with the diagnostic fluid;

wherein the external opening adjacent the first end generates a back-flow within the lumen which causes the fluid to enter and inflate the balloon through the second opening.

9.(AMENDED) A catheter apparatus useful for non-surgical entry into a uterus to dispense a diagnostic fluid therein, the catheter apparatus comprising:

a catheter;

a syringe for delivering the diagnostic fluid into the catheter;

the catheter having a balloon disposed marginally adjacent to a first end thereof for fluid sealing the interior of the subject uterus, a lumen extending from the first end to a second end of the

catheter, the lumen having an external opening adjacent the first end for dispensing the diagnostic fluid into the interior of a subject uterus and a second opening in fluid communication with the interior of the balloon for inflation thereof with the diagnostic fluid;

wherein the external opening adjacent the first end generates a back-flow within the lumen which causes the fluid to enter and inflate the balloon through the second opening.